

*updated Nov 16, 2023

RB SERVICE DEPT. WORK ORDER FORM

MAX Authorized Rebar Tier Repair Service Center

Date Shipped:

Please complete	ana sabn		ii witti yodi	i itobai iii	C1 (3)						
Company Name					Phone				Mobile		
Contact Person					Email						
Return Shipping Address					City		State			Zip	
* Please fill out this se * Feel free to describe		-		-	r equipment		MAXIMUM	5 UNITS PE	R WORK OR	RDER FORM	
Model:	RB217	RB218	RB397	RB398	RB398S	RB401T-E	RB441T	RB517	RB518	RB611T	RB655
Unit Qty:											
Charger Qty:											
Battery Qty:											
Tool Case Qty:											
	*Rush fees *Rush servi	ice cannot be	d on parts ava	ailability *Col Standard ser	vice after cor	ush Service leandow	n of parts (s	ee Checklist	below, Step ‡	<i>‡ 5)</i>	1.2
Please do not write be			rved for RB I			<u> </u>		ect if you are		zed MAX Dis	stributor
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S/N		S/N EST		S/N EST		S/N EST		S/N EST			
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